#### FORM D



UNITED STATES / //
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL						
OMB Number: 3235-0076						
Expires:						
Estimated average burden						
hours per response 16.00						

SEC USE ONLY						
Prefix	Serial					
1	1					
DATE RECEIVED						
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UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
REALTY ACQUISITIONS & TRUST, INC.  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE T. RECENTER
Type of Filing: New Filing Amendment	- COEIVED
A. BASIC IDENTIFICATION DATA	OCT 2 3 2006 >
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  REALTY ACQUISITIONS & TRUST, INC.	203 450
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3350 LAGO DE TALAVERA, LAKE WORTH, FL 33460	(954) 464-6843
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	1
ACQUISITION, DEVELOPMENT AND SALE OF REAL ESTATE PROPERTIES	;
Type of Business Organization	please specify): PROCESSED
	please specify):
business trust   limited partnership, to be formed	NOV 0 6 2006
Month Year	mated :
Actual or Estimated Date of Incorporation or Organization: 10 04 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering	A notice is deemed filed with the U.S. Securities

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### – ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

BEST AVAILABLE COPY

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter ■ Beneficial Owner Check Box(es) that Apply: **Z** Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) VITALE, ROBERT J. Business or Residence Address (Number and Street, City, State, Zip Code) 3350 LAGO DE TALAVERA, LAKE WORTH, FL 33460 Check Box(es) that Apply: Beneficial Owner Z Executive Officer Director General and/or ✓ Promoter Managing Partner Full Name (Last name first, if individual) VITALE, ANTHONY J. Business or Residence Address (Number and Street, City, State, Zip Code) 3350 LAGO DE TALAVERA, LAKE WORTH, FL 33460 ☐ Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Executive Officer Check Box(es) that Apply: Beneficial Owner Director General and/or Managing Partner .Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No <b>⊠</b>				
2.								<sub>\$_</sub> 10,	000.00				
								Yes	No				
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	•	Last name	first, if indi	vidual)									
			Address (N	umber and	d Street, Ci	ity, State, Z	Lip Code)				<u>.</u>		
None	A a a	aniated D	oker or Dea	.1									
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			Listed Has										
•	(Check	"All States	" or check	individual	l States)	*	****************	*************		**************	***************************************	☐ Al	l States
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Full	Name (l	Last name	first, if indi	vidual)					1				
Busi	ness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)	·					<u>-</u>
Nam	e of Ass	ociated Br	oker or Dea	aler	<u>.</u>		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	, <del></del>			
State	s in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers		•				<del> </del>
1	(Check	"All States	" or check	individual	l States)		***************************************	•••		t	***************************************	☐ Al	1 States
1	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full	Name (	Last name	first, if indi	vidual)									
Busi	ness or	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Nam	e of Ass	sociated B	oker or De	aler									
State	es in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers					·	
			s" or check									☐ Al	1 States
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## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check							
	this box in and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.							
	,	Aggregate	Amount Already					
	Type of Security	Offering Price	Sold					
	Debt	\$	\$					
	Equity	\$_3,000,000.00	\$_0.00					
	Common Preferred							
	Convertible Securities (including warrants)	\$	\$					
	Partnership Interests	\$	\$					
	Other (Specify)							
	Total	\$_3,000,000.00	<u>\$_0.00</u>					
	Answer also in Appendix, Column 3, if filing under ULOE.							
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:						
		Number	Aggregate Dollar Amount					
		Investors	of Purchases § 0.00					
	Accredited Investors		<u> </u>					
	Non-accredited Investors		\$ 0.00					
	Total (for filings under Rule 504 only)		\$					
	Answer also in Appendix, Column 4, if filing under ULOE.							
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.							
	·	Type of	Dollar Amount					
	Type of Offering	Security	Sold					
	Rule 505		\$					
	Regulation A		<b>\$</b>					
	Rule 504		\$					
	Total		\$_0.00					
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.							
	Transfer Agent's Fees		\$					
	Printing and Engraving Costs		\$					
	Legal Fees		\$ 2,500.00					
	Accounting Fees		\$					
	Engineering Fees		\$					
	Sales Commissions (specify finders' fees separately)		\$					
	Other Expenses (identify) ADMINISTRATIVE AND OFFICE EXPENSES	_	\$ 1,000.00					
	Total		\$ 3,500.00					

	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Q proceeds to the issuer."	Duestion 4.a. This difference is the "adjusted gross"		\$2,996,500.00
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$_100,000.00	
	Purchase of real estate		]\$	<b>2886500</b>
	Purchase, rental or leasing and installation of machi		] \$	
	Construction or leasing of plant buildings and facili	ities	] \$	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another	]\$	
	Repayment of indebtedness	_		<del></del>
	Working capital		] \$	<b>✓</b> \$ 10,000.00
	Other (specify):		] \$	
			] \$	<u>\$</u>
	Column Totals	······	100,000.00	<b>2</b> ,896,500.0
	Total Payments Listed (column totals added)		<b>/</b> \$_2,9	996,500.00
		D. FEDERAL SIGNATURE		Arg. T
ig	e issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furni information furnished by the issuer to any non-accre-	ish to the U.S. Securities and Exchange Commiss	ion, upon writter	
SSI	uer (Print or Type)	Signaty(e)	ate	<del> </del>
RE	EALTY ACQUISITIONS & TRUST, INC.	Koperta Vitale	10/17/0	6
va:	ne of Signer (Print or Type)	Title of Signer (Vint or Type)	1.110	
	BERT J. VITALE	PRESIDENT		

### - ATTENTION -